

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S)

01834760

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
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TOTAL IND.	<i>3</i>					
TOTAL DEP.	<i>43</i>					
TOTAL CLAIMS	<i>46</i>					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

BEST AVAILABLE COPY